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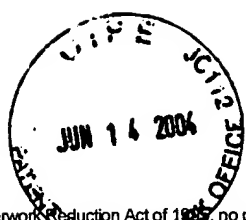
PTO/SB/21 (08-03)  
Approved for use through 07/31/2006. OMB 0651-0031  
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE  
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/816,850
		Filing Date	March 23, 2001
		First Named Inventor	Roger de la TORRE
		Art Unit	3743
		Examiner Name	K. Odland
Total Number of Pages in This Submission	7+6 References	Attorney Docket Number	514362000100

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) - 2 pages  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental) and PTO Form 1449 - 4 pages + 6 References  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Return receipt postcard.
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	MORRISON & FOERSTER LLP (Customer No. 20872) Cameron A. King - 41,897
Signature	
Date	6-9-04

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: June 9, 2004	Signature:  (Victoria A. Wilson)

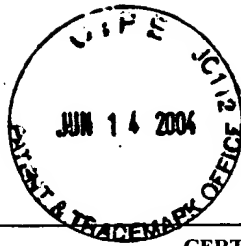


PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2004		Complete if Known																																	
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	09/816,850																																
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	March 23, 2001																																
		First Named Inventor	Roger de la TORRE																																
		Examiner Name	K. Odland																																
TOTAL AMOUNT OF PAYMENT (\$)		180.00	Attorney Docket No. 514362000100																																
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																	
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<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP																																			
The Director is authorized to: (check all that apply)		Large Entity    Small Entity																																	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments																																			
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)		Fee Description																																	
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FEE CALCULATION		Fee Paid																																	
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<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th>Large Entity</th><th>Small Entity</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>Fee Code (\$)</td><td>Fee Code (\$)</td><td></td><td></td></tr><tr><td>1001 770</td><td>2001 385</td><td>Utility filing fee</td><td></td></tr><tr><td>1002 340</td><td>2002 170</td><td>Design filing fee</td><td></td></tr><tr><td>1003 530</td><td>2003 265</td><td>Plant filing fee</td><td></td></tr><tr><td>1004 770</td><td>2004 385</td><td>Reissue filing fee</td><td></td></tr><tr><td>1005 160</td><td>2005 80</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="2" style="text-align: right;">SUBTOTAL (1)</td><td>(\$)</td><td>0.00</td></tr></tbody></table>		Large Entity	Small Entity	Fee Description	Fee Paid	Fee Code (\$)	Fee Code (\$)			1001 770	2001 385	Utility filing fee		1002 340	2002 170	Design filing fee		1003 530	2003 265	Plant filing fee		1004 770	2004 385	Reissue filing fee		1005 160	2005 80	Provisional filing fee		SUBTOTAL (1)		(\$)	0.00	2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	
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PATENT  
Docket No. 514362000100

CERTIFICATE OF MAILING BY "FIRST CLASS MAIL"

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:  
MS AMENDMENTS, Commissioner for Patents, Alexandria, VA, 22313 on June 9, 2004

*Victoria Wilson*  
Victoria Wilson

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In the application of:

Roger de la TORRE et al.

Serial No.: 09/816,850

Filing Date: March 23, 2001

For: METHOD AND DEVICE FOR USE IN  
MINIMALLY INVASIVE PLACEMENT  
OF INTRAGASTRIC DEVICES

Examiner: K. ODLAND

Group Art Unit: 3743

**THIRD SUPPLEMENTAL INFORMATION DISCLOSURE  
STATEMENT UNDER 37 C.F.R. § 1.97**

MS AMENDMENTS  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicants submit for consideration in the above-identified application the documents listed on the attached Form PTO-1449. Copies of the documents are also submitted herewith. The Examiner is requested to make these documents of record.

06/16/2004 EFLORES 00000025 031952 09816850

01 FC:1806 180.00 DA

This Supplemental Information Disclosure Statement is submitted:

- ☐ Within three months of the application filing date or before mailing of a first Office Action on the merits; accordingly, no fee or separate requirements are required.
- ☒ **After receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance.**
  - ☐ A fee is required. A check in the amount of \* is enclosed.
  - ☒ **A fee is required. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.**
  - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below; accordingly, no fee is believed to be due.
- ☐ After mailing of a final Office Action or Notice of Allowance, but before payment of the issue fee.
  - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below and a check in the amount of \* is enclosed.
  - ☐ A Certification under 37 C.F.R. § 1.97(e) is provided below and a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate.


Applicants would appreciate the Examiner initialing and returning the Form PTO-1449, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the unlikely event that the transmittal letter is separated from this document and the Patent Office determines that an extension and/or other relief is required, applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to Deposit Account No. 03-1952 referencing docket no. 514362000100. However, the Commissioner is not authorized to charge the cost of the issue fee to the Deposit Account.

Dated: June 9, 2004

Respectfully submitted,

By:   
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Form PTO-1449

INFORMATION DISCLOSURE CITATION  
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(Use several sheets if necessary)

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Roger de la TORRE et al.

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## U.S. PATENT DOCUMENTS

Examiner Initials	Ref. No.	Date	Document No.	Name	Class	Subclass	Filing Date If Appropriate
	1.	02/13/2001	6,186,985	Snow			
	2.	09/28/1993	5,248,302	Patrick et al.			
	3.	07/14/1992	5,129,915	Cantenys			
	4.	01/03/1989	4,795,430	Quinn et al.			
	5.	01/19/1982	4,311,146	Wonder			

## FOREIGN PATENT DOCUMENTS

Examiner Initials	Ref. No.	Date	Document No.	Country	Class	Subclass	Translation YES NO
	6.	03/07/1997	WO 97/23157	PCT			

## OTHER DOCUMENTS

(including author, title, Date, Pertinent Pages, Etc.)

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EXAMINER: Initial if citation considered, whether or not the citation conforms with MPEP 609. Draw a line through the citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.